

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO	DATE
FEE DETERMINATION	8m		10-15-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	LI	1106	11/13/01
RESPONSE FORMALITY REVIEW	M.D.	625	03-27-02

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions  
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3/27/02  
11/14